

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09 / 514,465	
	Filing Date	28-Feb-2000	
	First Named Inventor	Margaret Motamed	
	Art Unit	2622	
	Examiner Name	Twyler Marie Lamb	
Total Number of Pages In This Submission	5	Attorney Docket Number	EFIM0069CIP

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm		

Hy

# FACSIMILE COVER SHEET

## CONFIDENTIAL

James Trosino  
268 Bush Street, #3434  
San Francisco, CA 94104 U.S.A.  
Telephone: +1-650-357-3997  
Facsimile: +1-650-357-3776

RECEIVED  
CENTRAL FAX CENTER  
SEP 22 2003

---

The information accompanying this facsimile transmission is ~~intended~~ only for the use of the recipient named below. The information contained in and transmitted with this facsimile contains information which is confidential, attorney work product or subject to the attorney client privilege. If you have received this facsimile in error, please immediately notify us by telephone to arrange for return of the original documents to us, and any disclosure, copying, distribution or the taking of any action in reliance on the contents of this faxed information is strictly prohibited.

---

DATE: 18 September 2003  
TO: Ms. Twyler Marie Lamb  
United States Patent And Trademark Office  
RE: Serial No. 09/514,465  
FAX: 703-872-9314  
FROM: James Trosino  
PAGES: 6

---

OFFICIAL

Please see attached.